

<b>CLAIMS ONLY</b>	SERIAL NO.	FILING DATE
APPLICANT(S)		

CLAIMS						
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2						
3						
4						
5						
6						
7						
8	1					
9						
10	1					
11						
12						
13						
14						
15						
16						
17	1					
18	1					
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36		14				
37		14				
38		14				
39	SKIP					
40		6				
41		6				
42		6				
43		6				
44	1					
45		1				
46						
47						
48						
49						
50						
TOTAL IND.	7					
TOTAL DEP.	96					
TOTAL CLAIMS	103					

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

BEST AVAILABLE COPY

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS